PATENT APPLICATION PEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

516831

CLAIMS AS FILED - PART I								SMALL EI	YTITY /		OTHER	THAN
			(Column	1)	(Column 2)		•	TYPE		OR •	SMALL	ENTITY
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	475	OR	BASIC FEE	
тот	AL CHARGEAE	BLE CLAIMS	/3 minus 20 =		*			X \$ 9 =		OR	X \$ 18 =	-
INDE	PENDENT CL	AIMS	' / n	ninus 3 =	•			X \$ 44 =		OR	X \$ 88 =	
MUL	TIPLE DEPEN	DENT CLAIM P	RESENT ·					+ \$ 150 =		OR	+ \$ 300 =	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	475	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN OR SMALL ENTITY	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X \$ 9 =		OR	X \$ 18 =	
	Independent	*	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	
TOTAL ADDIT. FEE OR ADDIT. FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X \$ 9 =		OR	X \$ 18 =	
	Independent	*	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	. <u> </u>
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 150 =		OR	+ \$ 300 =	
		_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUM PREVIO PAID	EST BER DUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	*	Minus	**		=		X \$ 9 =		OR	X \$ 18 =	
	Independent	*	Minus	***		=		X \$ 44 =		OR	X \$ 88 =	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM			+ \$ 150 =		OR	+ \$ 300 =	···
							: L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 11/2004)

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